



MISSOURI DEPARTMENT OF REVENUE
TAXATION DIVISION
PO BOX 2200
JEFFERSON CITY MO 65105-2200

**SAFE AT HOME - REQUEST FOR ADDRESS
CONFIDENTIALITY OF TAX RECORDS**

FORM
5143
(REV. 08-2010)

This form must be completed and returned to the Missouri Department of Revenue, Taxation Division, to initiate/update a "Safe at Home" address for taxes administered by the Taxation Division. To change any other addresses to a "Safe at Home" address please contact the appropriate area or government agency.

Please complete the information below and attach a copy of your "Safe at Home" authorization card issued by the Secretary of State. This information will be used to update your mail-to address in the Taxation Division's records with your "Safe at Home" address. Your "Safe at Home" address will be used only on the tax types you designate below.

INDIVIDUAL INCOME TAX

Taxpayer Name (last, first, middle)		Social Security Number	
Previous Address	City	State	Zip

BUSINESS TAX

Business Name		Missouri Tax ID Number	
Previous Address	City	State	Zip

Safe at Home Identification Number _____

TAX RECORDS

Check the box or boxes below for the tax programs that affect you.

- | | |
|---|--|
| <input type="checkbox"/> Individual Income Tax | <input type="checkbox"/> Sales Tax |
| <input type="checkbox"/> Property Tax Credit | <input type="checkbox"/> Vendor's Use Tax |
| <input type="checkbox"/> Fiduciary Tax | <input type="checkbox"/> Consumer's Use Tax |
| <input type="checkbox"/> Employer Withholding Tax | <input type="checkbox"/> Corporation Income Tax |
| <input type="checkbox"/> Cigarette/Other Tobacco Products Tax | <input type="checkbox"/> Corporation Franchise Tax |
| <input type="checkbox"/> Motor Fuel Tax | <input type="checkbox"/> Tire and/or Battery Fee |
| <input type="checkbox"/> Other: (Please Specify) _____ | |

I understand the "Safe at Home" address will be used as my mailing address for the Department to send tax related mail for the taxes noted above. This address only affects the mailing address of my residence and does not affect any other addresses. This address will be used until I notify the Department of an address change or the Secretary of State rejects my mail because I am no longer a qualified participant of the "Safe at Home" program. I understand if I file any returns or other documents or any are filed on my behalf, with a non-"Safe at Home" address, it constitutes notification to the Taxation Division that I am no longer in the "Safe at Home" program and the Taxation Division will no longer use the "Safe at Home" address as my mail-to address. I also confirm that I have been certified as an authorized "Safe at Home" program participant approved by the Secretary of State.

Signature	Date ____/____/____
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Mail to: Missouri Department of Revenue
Taxation Division
P.O. Box 2200
Jefferson City, Missouri 65105

If you have any questions, please contact
the Taxation Division at (573) 751-3505.

A copy of your "Safe at Home" authorization card must be attached with this form.